

# CONSENT FOR TRANSFUSION OF BLOOD COMPONENTS

## (Instructions for Physicians and Nurses)

1. What is the purpose of the "Consent for Transfusion of Blood Components?"

This consent provides a structure for a patient to make an informed choice regarding blood transfusion. It permits the patient to participate more fully in treatment decisions. Consent is required prior to transfusion of cellular blood components, plasma, cryoprecipitate, and platelets.

2. Who is responsible for obtaining consent?

The patient's physician is responsible for discussing the risks and benefits of blood transfusion and for obtaining consent or documenting refusal on the attached form. If the patient is a Jehovah's Witness and unwilling to consent to transfusion, refer to: Policy and Communications Bulletin, The Clinical Center, M93-11, "Administration of Blood Products to Jehovah's Witnesses."

3. When should consent be obtained?

Consent for transfusion should be obtained as soon as possible if a transfusion is anticipated or contemplated. This permits patients to arrange for autologous or directed donations, if they wish. A prescription for autologous and/or directed donations is necessary.

4. Is consent required before each transfusion?

No. Consent is generally required **the first time** that a transfusion is ordered for a patient in the Clinical Center. A consent form is valid for one year after signature. Completed consent forms are placed in the medical record under Section 4: Authorization.

5. Who is responsible for insuring that consent has been obtained?

Whenever a transfusion is requested, the nurse or physician responsible for administering the transfusion is also responsible for insuring that a signed consent form is present in the medical record. If the consent form is absent, the patient's physician should be contacted and consent obtained prior to transfusion.

6. What if a transfusion is required in an emergency?

In the absence of refusal by a competent patient, transfusion should not be withheld in an emergency. A note should be placed in the medical record under Section 2: Progress Notes documenting the circumstances requiring the transfusion.

7. Where can I obtain information and assistance for questions regarding transfusion?

A physician from the Department of Transfusion Medicine is available for consultation at all times. Call 496-4506 for assistance. Pamphlets regarding blood transfusion are available on the patient care units for distribution to patients.

## MEDICAL RECORD

## Consent for Transfusion of Blood Components

As part of your medical care, your doctors may recommend that you, or your child, have a need for transfusion of blood or blood components. You may agree to receive a transfusion or refuse a transfusion at any time. The risks of refusing a transfusion when your doctors believe it is necessary include problems such as shock, internal bleeding in vital organs, or death from excessive blood loss. Signing this document will authorize your doctor to give you transfusions if that becomes necessary.

All blood for transfusion in the Clinical Center is obtained from volunteer (non-paid) donors and has been screened by several different tests to detect evidence of blood-transmitted disease. Blood transfusions are now safer than they have ever been, but they are not entirely risk free. The risks of transfusions include reactions such as fever and chills (1 in 100 transfusions), and disease transmission. Diseases transmitted by transfusion include the viruses that cause AIDS (less than 1 in 1,000,000 transfusions) and two forms of liver infection - hepatitis B (less than 1 in 100,000 transfusions) and hepatitis C (less than 1 in 200,000 transfusions). Other complications such as death from incompatible blood (less than 1 in 800,000 transfusions) are rare, but may be explained to you by your doctor.

There may be alternatives to receiving blood transfusions from volunteer community donors. For some patients, it is possible to use medicine to increase production of blood cells. Also, if your medical condition permits, you can consider donating your own blood for transfusion for a scheduled operation or collecting the blood that you lose during surgery. Alternatively, you can ask family or friends to donate for you at the Clinical Center, although studies have shown that blood obtained in this way is no safer than blood from volunteer community donors. Your doctor will be happy to answer any questions that you may have regarding blood transfusion.

Counseling Physician/Dentist: I have counseled the patient as to the risks and benefits of blood transfusion.

\_\_\_\_\_  
(Signature of Counseling Physician/Dentist)

\_\_\_\_\_  
(Date)

Patient: I understand the risks and benefits of blood transfusion, and hereby  
☐ **consent**    ☐ **refuse** that such transfusion be given if necessary.

\_\_\_\_\_  
(Signature of Patient)

\_\_\_\_\_  
(Date)

Parent or Guardian: (When the patient is a minor or unable to give consent)

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_  
understand the risks and benefits of blood transfusions, and hereby consent that such  
transfusions be given if necessary.

\_\_\_\_\_  
(Signature of Parent/Guardian)

\_\_\_\_\_  
(Date)

Witness:

\_\_\_\_\_  
(Signature of Witness)

\_\_\_\_\_  
(Date)

Patient Identification

Consent for Transfusion of Blood Components  
NIH-2514-4 (11-03)  
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File in Section 4: Authorization